

## SAN DIEGO COUNTY CUPA DEPARTMENT OF ENVIRONMENTAL HEALTH HAZARDOUS MATERIALS DIVISION

P.O. BOX 129261, SAN DIEGO, CA 92112-9261 (619) 338-2222 FAX (619) 338-2377 1-800-253-9933

## PHOTOGRAPHIC WASTE ONLY NOTIFICATION

The San Diego County Code (SDCC) of Regulatory Ordinances Section 65.107 provides for the submittal of an annual notification by businesses that generate photographic waste containing silver. Businesses that submit an annual notification will not be subject to a routine site inspection. Businesses submitting annual notifications will also be subject to reduced fees for their annual Unified Program Facility Permits. To be eligible, all of the following conditions must be met:

- The business generates silver containing photographic waste only and does not generate any other hazardous waste or medical waste. The silver waste generated from the photographic process must be reclaimed or recycled.
- The business does not store hazardous materials in quantities greater than or equal to 55 gallons, 500 pounds, or 200 cubic feet of compressed gases\*, or other discloseable hazardous materials.
- The business does not have underground storage tanks.

COMPLETE THE FOLLOWING INFORMATION AND SUBMIT THIS NOTIFICATION TO THE ABOVE ADDRESS. [See instructions on the back. \*Certain gases (helium, carbon dioxide, propane, closed cooling system gases, and fire suppressing gases in closed systems) have exemptions from disclosure — see instructions on back!

from disclosure – see instructions on back].				11 00	•	
	I. IDENTIFIC	CATION	Ţ			
FACILITY ID # 3 7 0 0 0				1		
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Bus	siness As)			3 BUSINE	SS PHONE	102
BUSINESS SITE ADDRESS						103
CITY		104	CA	ZIP CODE		105
BUSINESS OPERATOR NAME			109	BUSINESS OP	ERATOR PHONE	110
II. BUSINESS OWNER						
OWNER NAME			111	OWNER PHON	IE	112
				( )		
OWNER MAILING ADDRESS (If different than business	s address)					113
CITY		114	STATE	115	ZIP CODE	116
TYPE OF PHOTOGRAPHIC WASTE GENERATED (Check the appropriate boxes below):    Fixer and or developer liquid waste containing silver (not treated on-site) (CA waste code 541) Hazmat Type:   Sludges containing silver generated from the treatment of fixer solutions (CA waste code 171) c - Waste    MAXIMUM AMOUNT OF WASTE STORED ON-SITE AT ANY ONE TIME:						
STORAGE METHOD	TREATMENT METI	HOD:	l N	JAME OF DUC	OTOGRAPHIC	
Plastic Drums 0-5 gallons  Plastic Drums 30 gallons  Metal Drums 0-5 gallons  Metal Drums 30 gallons  Process Equipment  (c)	Recycle (fixer shipped off-site for recycling) (001)  Treated, then sewer (sludge sent off for further reclamation) (103)			HAULER:	TOGRAPHIC	(9997)
Certification: I certify under penalty of law the believe the information is true, accurate, and consumption of San Diego County Department of Environment	omplete. This business	is requir	ed to obta	ain a Unified Pr	ogram Facility	
SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REI	PRESENTATIVE	DATE /	134	NAME OF DOC	CUMENT PREPARER	135
NAME OF SIGNER (print)	136	TITLE OF	SIGNER			137

## **ATTENTION: Generators of Photographic Waste Only**

As of July 1, 2001, The San Diego County Code (SDCC) Section 65.107 established a new Unified Program Facility Permit type for generators of photographic waste only. A business that only generates photographic waste may submit an annual notification to the San Diego County, Department of Environmental Health, Hazardous Materials Division (HMD). Businesses submitting this annual notification will not be subject to routine site inspections. Random inspections may occur, but the permit status will not change if all of the conditions listed below are met. There is an annual permit fee, which is significantly less than a standard permit fee, along with an annual State Surcharge. If a business does not submit an annual notification or meet all the conditions listed below, the business will be subject to the standard permit, including routine inspections and increased annual permit fees.

To be eligible for the photographic waste only permit type, all of the following conditions must be met:

- The business generates silver containing photographic waste only and does not generate any other hazardous waste or medical waste. The silver waste generated from the photographic process must be reclaimed or recycled. The generator must be a Conditionally Exempt Small Quantity generator or the facility is deemed to have a "zero" waste count (i.e., on-site treatment without any storage).
- The business does not store hazardous materials in quantities greater than or equal to 55 gallons for liquids, or 500 pounds for solids, or other discloseable hazardous materials.
- The business does not store hazardous materials in quantities greater than or equal to 200 cubic feet of compressed gases except for the following:
  - (a) Non-cryogenic helium of not more than 1000 cubic feet for the purpose of filling party balloons;
  - (b) Non-refrigerated or non-cryogenic carbon dioxide of not more than 6000 cubic feet for the beverage carbonation;
  - (c) Refrigerated or cryogenic carbon dioxide of not more than 3500 cubic feet for beverage carbonation;
  - (d) Propane of not more than 1000 gallons used exclusively for heating, cooling or cooking;
  - (e) Closed cooling system gases; or
  - (f) Fire suppressing gases in closed systems
- The business does not have underground storage tanks.
- The business submits the annual Photographic Waste Only Notification form to the HMD. This notification will be mailed annually to generators of photographic waste only.

If you have any questions regarding photographic waste only notifications, please contact the Hazardous Materials Duty Specialist at (619) 338-2231.

## Instructions for Completing the Photographic Waste Only Notification

Note: The numbering of the instructions follows the data element numbers that are on Statewide reporting forms. These data element numbers are used for electronic submission and are the same as the numbering used in Title 27 CCR, Appendix C. The codes in parenthesis are for office use only.

- FACILITY ID NUMBER Enter the 6 character permit # from your Unified Program Facility Permit. If you do not have a Unified Program Facility
  Permit, leave this blank.
- 3. BUSINESS NAME Enter the full legal name of the business. This is the same as the terms "Facility Name" or "DBA" Doing Business As.
- 102. BUSINESS PHONE Enter the phone number, area code first, and any extension.
- 103. BUSINESS SITE ADDRESS Enter the street address where the facility is located. No post office box numbers are allowed. This information must provide a means to geographically locate the facility. If the mailing address is different, also complete #113- #116.
- 104. CITY Enter the city or unincorporated area in which business site is located.
- 105. ZIP CODE Enter the zip code of business site. The extra 4 digit zip may also be added.
- 109. BUSINESS OPERATOR NAME Enter the name of the business operator which is the name used for mailing correspondence.
- 110. BUSINESS OPERATOR PHONE Enter business operator phone number, if different from business phone, area code first, and any extension.
- 111. OWNER NAME Enter name of business owner, if different from business operator.
- 112. OWNER PHONE Enter the business owner's phone number if different from business phone, area code first, and any extension.
- 113. OWNER MAILING ADDRESS Enter the owner's mailing address where business related correspondence should be sent, if different from business site address.
- 114. OWNER CITY Enter the name of the city for the owner's mailing address.
- 115. OWNER STATE Enter the 2 character state abbreviation for the owner's mailing address.
- 116. OWNER ZIP CODE Enter the zip code for the owner's address. The extra 4 digit zip may also be added.
- 134. DATE Enter the date that the document was signed.
- 135. NAME OF DOCUMENT PREPARER Enter the full name of the person who prepared the inventory submittal information.
- 136. NAME OF SIGNER Enter the full printed name of the person signing the page. The signer certifies to a familiarity with the information submitted and that based on the signer's inquiry of those individuals responsible for obtaining the information, all the information submitted is true, accurate and complete.
  - SIGNATURE OF OWNER/ OPERATOR OR DESIGNATED REPRESENTATIVE The Business Owner/Operator, or officially designated representative of the Owner/Operator, shall sign in the space provided. This signature certifies that the signer is familiar with the information submitted and that based on the signer's inquiry of those individuals responsible for obtaining the information it is the Signer's belief that the submitted information is true, accurate and complete.
- 137. TITLE OF SIGNER Enter the title of the person signing the page.